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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u></u>
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	<u>Diana</u> First name	First name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport	Middle name Sanders Last name	Middle name Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer	XXX - XX- 9121 OR 9 xx - xx-	xxx - xx- OR 9 xx - xx-
Identification number (ITIN)		

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De	ebtor 1 Diana	Middle Name	Sanders Last Namo	Case number (if known)		
	First Name	iviiuule Naffle	Last Name			
		About Debtor 1:		About Debtor	2 (Spouse Onl	y in a Joint Case):
4.	Any business names and Employer	I have not used any busine	ess names or EINs.	I have not use	ed any business nam	nes or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business name)	
	last 8 years	Business name	Business name)		
Include trade names and doing business as names		EIN		EIN		
		EIN		EIN		
5.	Where you live	204 C. Kastran A., Ast 24		If Debtor 2 lives	at a different add	ress:
		321 S. Kostner Ave., Apt 3A Number Street		Number	Street	
					-	_
		Chicago Illinois	60624			
		City State	Zip Code	City	State	Zip Code
		Cook				
		County		County		
		If your mailing address is dif	ferent from the one above,	If Debtor 2's maili	ing address is diffe	erent from yours, fill it
		fill it in here. Note that the cour	t will send any notices to you at	in here. Note that t		ny notices to this mailing
		this mailing address.		address.		
		Number Street		- Number	Street	
				-	Olicot	
				_		
		City State	Zip Code	City	State	Zip Code
6.	Why you are choosing this	Check one:		Check one:		
	district to file for	Over the last 180 days bef lived in this district longer	ore filing this petition, I have than in any other district.		180 days before filin	ng this petition, I have any other district.
	bankruptcy		blain. (See 28 U.S.C. §§ 1408.)	_	•	See 28 U.S.C. §§ 1408.)
		Thave district reason. Exp	Statil. (332 23 3.3.3. 33 1-33.)	Thave another	7 Todoori. Explairi. (C	300 20 0.0.0. 33 1400.)
				-		
				-		

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Dei	otor 1 Diana	Sanders Case number (if known)	
Par	First Name t2: Tell the Court Abo	Middle Name Last Name It Your Bankruptcy Case	
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankrupt 32010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13	cy (Form
	How you will pay the fee	✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee yourself, may pay with cash, cashier's check, or money order If your attorney is submitting your pa on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the <i>Applica Individuals to Pay Your Filing Fee in Installments</i> (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chap By law, a judge may, but is not required to, waive your fee, and may do so only if your incom less than 150% of the official poverty line that applies to your family size and you are unable the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.	you nyment ation for oter 7. ne is e to pay
	Have you filed for bankruptcy within the last 8 years?	✓ No. Yes. District When Case number	
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known MM / DD / YYYY Case number, if known MM / DD / YYYYY	
	Do you rent your residence?	 ✓ No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. ✓ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition. 	

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Debtor 1 Diana				Sanders	Case number (if known)		
First Name				Last Name			
Part 3: Report About An	y Bus	siness	es You Own as a S	ole Proprietor			
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole		No. Yes.	Go to Part 4. Name and location of b Name of business, if an Number City	Street	state	Zip Code	- -
proprietorship, use a separate sheet and attach it to this petition.			Single Asset Re Stockbroker (as	siness (as defined in eal Estate (as defined defined in 11 U.S.C. ker (as defined in 11	11 U.S.C. § 101(27A)) I in 11 U.S.C. § 101(51B)) § 101(53A))		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the propriate business debtor?					ecent balance sheet, statement	t of	
For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No. No. Yes.	Bankruptcy Code.	er 11, but I am NOT	a small business debtor accord	ling to the definition in the the definition in the Bankruptcy	y Code.
Part 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any P	roperty That Needs Imn	nediate Attention	
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard		No. Yes.	What is the hazard? If immediate attention is i				
to public health or safety? Or do you own any property that needs immediate attention?		,	Where is the property?	Number	Street		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	Zip Code	

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Debtor 1 Diana Sanders Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone.

If you believe you are not required to receive a briefing

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

If you believe you are not required to receive a briefing

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

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Debtor 1 Diana First Name		anders Case number (if	known)				
	restions for Reporting Purpos						
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts.						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	ate that mpt						
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000				
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 millior	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 millior	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
Part 7: Sign Below							
For you	and correct. If I have chosen to file under C 11,12, or 13 of title 11, United S choose to proceed under Chapt If no attorney represents me at me fill out this document, I hav I request relief in accordance we I understand making a false state.	Chapter 7, I am aware that I may postates Code. I understand the relievant of the payor agree to pay so the obtained and read the notice relievant the chapter of title 11, United statement, concealing property, or coase can result in fines up to \$250 (52, 1341, 1519, and 3571.	jury that the information provided is true proceed, if eligible, under Chapter 7, ef available under each chapter, and I comeone who is not an attorney to help quired by 11 U.S.C. § 342(b). States Code, specified in this petition. obtaining money or property by fraud in 1,000, or imprisonment for up to 20 ure of Debtor 2				

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Debtor 1	Diana		Sanders	Case number	(if known)
	First Name	Middle Name	Last Name		
you are by one If you a represe	r attorney, if represented re not ented by an y, you do not	eligibility to proceed un the relief available und to the debtor(s) the no	nder Chapter 7, 11, 1 der each chapter for tice required by 11 U	2, or 13 of title 11, U which the person is J.S.C. § 342(b) and, i	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
	file this page.	/s/ Elizabeth Place	k	Date	9/29/2016
	ine ine progen	Signature of Attorney		Date	MM / DD / YYYY
		Elizabeth Placek Printed name Semrad Law Firm Firm name 20 S. Clark Street Street 28th Floor			
		Chicago		Illinois	60603
		City		State	Zip Code
		Contact phone	3124477838	Email address	eplacek@semradlaw.com
				Illin	ois
		Bar number		Star	te

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Fill in this information to identify your case:							
Debtor 1	Diana		Sanders				
	First Name	Middle Name	Last Name	<u></u>			
Debtor 2							
(Spouse, if filing	^{ng)} First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case number (If known)			(Glate)				

Check if this is an
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$3,442.00
1c. Copy line 63, Total of all property on Schedule A/B	\$3,442.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$1,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$8,240.00
Your total liabilities	\$9,240.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,638.33
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$2,635.00

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Del	otor 1	Diana		Sanders	Case number	(if known)				
Par	t 4:	First Name Answer These Quest	Middle Name	Last Name tive and Statistical R	ecords					
6. A	6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
	✓ Ye	es.								
7. V	7. What kind of debt do you have?									
		our debts are primarily co mily, or household purpose.			,					
		our debts are not primaril		nave nothing to report on this	s part of the form. Che	ck this box and subm	nit			
8.		the Statement of Your C 122A-1 Line 11; OR, Form	•	1,,,	nthly income from Offi	cial	\$802.61			
9.	Сор	by the following special ca	ategories of claims from	Part 4, line 6 of Schedule	E/F:					
	From	m Part 4 on Schedule E/F	, copy the following:		То	tal claim				
	9a. [Domestic support obligation	s (Copy line 6a.)		\$0	.00				
	9b. 7	Taxes and certain other debt	s you owe the government.	(Copy line 6b.)	\$0	.00				
	9c. C	Claims for death or persona	l injury while you were intox	cicated. (Copy line 6c.)	\$0	.00				
9d. Student loans. (Copy line 6f.) \$0.00										
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)									
	9f. D	Debts to pension or profit-sh	aring plans, and other simi	lar debts. (Copy line 6h.)	<u>\$0</u>	.00				
	an .	Total Add lines 9a through	Qf		0.0	00				

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Debtor 1		Diana			Sanders			
		First Name	Middle N	lame	_			
Debtor 2	:f f:l:===)							
(Spouse,	ii iiiing,	First Name	Middle N	Name	Last Name			
United Sta	ates Ba	ankruptcy Court for the:	Northern		District of Illinois			
Case num	nber				(State)			
Officia	al Fo	orm 106A/B					,	Check if this is an amended filing
Sche	dul	e A/B: Prope	erty					12/1
category v responsib write your	where le for name	you think it fits best. B supplying correct info and case number (if kr	e as complete and rmation. If more s nown). Answer ev	d acc space ery o	sset only once. If an asset fits in more to curate as possible. If two married people is needed, attach a separate sheet to juestion. d, or Other Real Estate You Ow	e are f this fo	iling together, both are or rm. On the top of any a	equally dditional pages,
1. Do you	ı own	or have any legal or eq	juitable interest in	any	residence, building, land, or similar pro	operty	?	
✓	No. G	So to Part 2						
	Yes. \	Where is the property?						
1.1	Stree	t address, if available, or	other description		at is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home		the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the portion you own?
	Numk	per Street			Land		Describe the nature of	
			7'- 0- 1-		Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	City	State	Zip Code	one	o has an interest in the property? Che	ck	Check if this is con (see instructions)	mmunity property
				Oth	er information you wish to add about	this ite	m, such as local	
.,				pro	perty identification number:		·	
1.2		have more than one, list taddress, if available, or			at is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative		the amount of any secure Creditors Who Have Cla Current value of the	laims or exemptions. Put ed claims on <i>Schedule D:</i> nims <i>Secured by Property</i> . Current value of the
				Ħ	Manufactured or mobile home		entire property?	portion you own?
	Numb	oer Street State	Zip Code		Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
				Wh	o has an interest in the property? Che	ck	Check if this is con (see instructions)	mmunity property
					Debtor 1 only		ш	
					Debtor 2 only			
					Debtor 1 and Debtor 2 only			
					At least one of the debtors and another			
				Oth	er information you wish to add about	this ite	m, such as local	

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Debtor 1	Diana First Name	Middle Name	Sanders Last Name	Case number	(if known)	
1.3	et address, if available, or oth	[What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	oly.	Do not deduct secured of the amount of any secure Creditors Who Have Claurent value of the entire property?	•
Nun City	ober Street State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
] []	Who has an interest in the property? (Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about the contraction of the debtors.		Check if this is column (see instructions)	mmunity property
		ion you own for a	property identification number: all of your entries from Part 1, includin re			
Do you ov you own th	at someone else drives. If you ns, trucks, tractors, sport utilit	quitable interest i lease a vehicle, als	in any vehicles, whether they are regis so report it on Schedule G: Executory Con ycles			
	Make Model: Year:	Ford Escape 2004	Who has an interest in the proper one. Debtor 1 only	ty? Check	the amount of any secure	laims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:	146000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community pro		Current value of the entire property? \$1200.00	Current value of the portion you own? \$1200.00
3.2	Make Model: Year: Approximate mileage:		Who has an interest in the proper one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ty? Check	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the portion you own?
	Other information:		At least one of the debtors and and instructions)			portion you own:

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Debtor 1		Sanders Case numbe	r (if known)	
	First Name Middle Name	e Last Name		
3.3	Make	Who has an interest in the property? Check		laims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors vvno Have Cla	aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
3.4		Who has an interest in the property? Check		laims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year: Approximate mileage:	Debtor 1 only	Creditors willo have Cit	aims Secured by Property.
	Approximate mileage.	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
4.1	Yes Make	Who has an interest in the property? Check	Do not deduct secured of	laims or exemptions. Put
4.1	Model:	one.		ed claims on <i>Schedule D:</i>
	Year:	Debtor 1 only		aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see		
		instructions)		
4.2	Make	Who has an interest in the property? Check	Do not deduct secured of	laims or exemptions. Put
	Model:	one.	•	ed claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)		
5. Add	the dollar value of the portion you own	for all of your entries from Part 2, including any entrie	s for pages	200.00
vou ha	ive attached for Part 2. Write that number	r here	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

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D	ebtor 1			Sanders	Case number (if known)	
D	art 3:	First Name Describe	Middle Name Your Personal and Househo	Last Name		
			ave any legal or equitable in		owing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		_	and furnishings liances, furniture, linens, china, kitche	enware		
✓	Yes. D	escribe	Used Furniture			\$1200.00
	7. Elect ı Exampl No		s and radios; audio, video, stereo, and	d digital equipment; computers, pr	rinters, scanners; music	
✓	Yes. D	escribe	Used Electronics			\$900.00
	Examp No	•	ue and figurines; paintings, prints, or other in, or baseball card collections; other			
). Equip Exampl	oment for sp les: Sports, ph	orts and hobbies lotographic, exercise, and other hobb ss; carpentry tools; musical instrument		, golf clubs, skis; canoes	
\leq						_
Ц	Yes. D	escribe				
	No		es, shotguns, ammunition, and relate	d equipment		
			clothes, furs, leather coats, designer v	wear, shoes, accessories		
\leq	No					
L	Yes. L	escribe				
	2. Jewe Exampl	•	ewelry, costume jewelry, engagement er	rings, wedding rings, heirloom je	ewelry, watches, gems,	
✓	Yes. D	escribe	Misc Jewelry			\$50.00
	Examp No	-farm animal les: Dogs, cat Describe	s s, birds, horses			
1	4 Anv	other person	lal and household items you did n	ot already list, including any he	ealth aids you did not list	
	No	otilei persor	iai ana nousenoia items you did n	or an eady hor, including any he	saidi alus you ulu liot list	
Ē		escribe				
			lue of all of your entries from Part			\$2150.00

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Den	Tinat Name	Mariana Maria	Saliueis	Case number (ii known)	
Part	First Name Describe Your	Middle Name r Financial Assets	Last Name		
		any legal or equitable int	erest in any of the fol	lowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	✓ No	ave in your wallet, in your home, in a		when you file your petition	
17.	Deposits of money Examples: Checking, s		; certificates of deposit; share	Cash:s in credit unions, brokerage houses, , list each.	
		17.1. Checking account:			
		17.2. Checking account:			
		17.3. Savings account:			_
		17.4. Savings account:			
		17.5. Certificates of deposit:			_
		17.6. Other financial account:	Pre-paid card Visa		\$0.00
		17.7. Other financial account:	To paid data vida		<u> </u>
		17.8. Other financial account:			
		17.9. Other financial account:			_
18.		s, or publicly traded stocks , investment accounts with brokerag	e firms, money market accoun	ots	
	✓ No	,	•		
	Yes	Institution or issuer name:			
		-			_
					_
19.	Non-publicly traded an LLC, partnership		ated and unincorporated bu	usinesses, including an interest in	
	Yes. Give specific information about them	Name of entity		% of ownership:	

Official Form 106A/B Schedule A/B: Property page 5

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Deb	tor 1	Diana		Sanders	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg	vernment and corportiable instruments in n-negotiable instrume No				
		Yes. Give specific information about them	Issuer name:			
21.	Ret	irement or pension	accounts			
	Exa	mples: Interests in IR	RA, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other	er pension or profit-sharing plans	
		Yes. List each	Type of account:	Institution name:		
		account separately.	401(k) or similar plan:			
			Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:	_		
			Additional account:			
			Additional account:			
22.	You Exa		orepayments deposits you have made so that you with landlords, prepaid rent, public			
		No		Institution name:		
	✓	Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:	with landlord		\$92.00
			Prepaid rent:			
			Telephone:	_		. ———
			Water:			
			Rented furniture:			
			Other:			
23.	_	•	r a periodic payment of money to y	ou, either for life or for a numbe	r of years)	
		No Yes	Issuer name and description:			
			-			

Official Form 106A/B Schedule A/B: Property page 6

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Debte	or 1 Diana First Name Midd	Sanders e Name Last Name	Case number (if known)	
24.		count in a qualified ABLE program, or under a	qualified state tuition program	<u> </u>
	✓ No	ption. Separately file the records of any interests.11 l	U.S.C. § 521(c):	
25.		property (other than anything listed in line 1), a	and rights or powers	
	exercisable for your benefit No			
	Yes. Describe			
26.		e secrets, and other intellectual property		
	No No	es, proceeds from royalties and licensing agreement	S	
	Yes. Describe			
27.	Licenses, franchises, and other general Examples: Building permits, exclusive lice	al intangibles enses, cooperative association holdings, liquor licens	ses professional licenses	
	✓ No		555, p. 5.5555.1	_
	Yes. Describe			
Mon	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or property owed to you? Tax refunds owed to you			portion you own? Do not deduct secured
				portion you own? Do not deduct secured
	Tax refunds owed to you ✓ No ✓ Yes. Give specific information		Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years			portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s	spousal support, child support, maintenance, divorce	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years	spousal support, child support, maintenance, divorce	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, so	spousal support, child support, maintenance, divorce	State: Local: settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, so	spousal support, child support, maintenance, divorce	State: Local: settlement, property settlement Alimony: Maintenance: Support:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, so	spousal support, child support, maintenance, divorce	State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s ✓ No Yes. Give specific information	spousal support, child support, maintenance, divorce	State: Local: settlement, property settlement Alimony: Maintenance: Support:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s ✓ No Yes. Give specific information	spousal support, child support, maintenance, divorce	State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s ✓ No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insurar Social Security benefits; unpaid	nce payments, disability benefits, sick pay, vacation pa	State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony, s ✓ No Yes. Give specific information	nce payments, disability benefits, sick pay, vacation pa	State: Local: settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Diana	Sanders	Case number (if known)	
	First Name Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health	Ith savings account (HSA); credit, hon	neowner's, or renter's insurance	
	✓ No Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from so If you are the beneficiary of a living trust, expect property because someone has died. No Yes. Describe		are currently entitled to receive	
	100. 2000/130			
33.	Claims against third parties, whether or not you Examples: Accidents, employment disputes, insura		emand for payment	
	✓ No ☐ Yes. Describe			
34.	Other contingent and unliquidated claims of to set off claims	every nature, including countercla	ims of the debtor and rights	
	✓ No Yes. Describe			
35.	Any financial assets you did not already list			
	✓ No Yes. Describe			
36.	Add the dollar value of all of your entries from for Part 4. Write that number here			\$92.00
Part	5: Describe Any Business-Related P	roperty You Own or Have an	Interest In. List any real estate	e in Part 1.
		•	· ·	
37.	Do you own or have any legal or equitable into No. Go to Part 6. Yes. Go to line 38.	erest in any business-related prope		Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or commissions you alrea	ady earned		or exemptions
	✓ No Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software,	modems, printers, copiers, fax machir	nes, rugs, telephones, desks, chairs, electr	ronic devices
	✓ No Yes. Describe			

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Deb	tor 1	Diana		Sanders	Case number (if known)	
40	Ma	First Name	Middle Name	Last Name use in business, and tools of	f vour trade	
40.			juipilielii, supplies you	use ili busiliess, aliu luuis di	your raue	
		No Yes. Describe				
	ш	res. Describe				
41.	Inv	entory				
	\checkmark	No				
	Ш	Yes. Describe				
		L				
42.			ips or joint ventures			
	✓	No		Name of antity	% of ownership:	
		Yes. Give specific		Name of entity:	% or ownership.	
		information about them				
43. (Cust	tomer lists, mailing	lists, or other compilat	ions		
	✓	No				
		Yes. Do your lists in	clude personally identifial	ole information (as defined in 11	U.S.C. § 101(41A))?	
		□ No				
		Yes. Descr	ribe			
4.4	•			- A P-4		
44.			property you did not alre	eady list		
	✓	No				
	ш	Yes. Give specific information				
			•	art 5, including any entries fo		
		_			·	at In
Part	t 6:	If you own or have ar	rarm- and Commer n interest in farmland, list it	cial Fishing-Related Pro in Part 1.	operty You Own or Have an Interes	st in.
46.	Do	you own or have a	ny legal or equitable in	erest in any farm- or commer	rcial fishing-related property?	
	V	No. Go to Part 7.				Current value of the
	Ë	Yes. Go to line 47.				portion you own? Do not deduct secured
		•				claims
47	Г-	rm onimala				or exemptions
4/.		rm animals amples: Livestock, por	ultry, farm-raised fish			
	V	1				
	<u>*</u>	Yes. Describe				
	_					

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Debt	or 1	Diana First Name Middle Name	Sanders	Case number (if known)	
10	Cro	First Name Middle Name pps-either growing or harvested	Last Name		
48.					
	뇓	No No Peopriha			
	Ш	Yes. Describe			
49.	Far	m and fishing equipment, implements, machinery, fixtu	res, and tools of trade		
	✓	No			
		Yes. Describe			
50.	Far	m and fishing supplies, chemicals, and feed			
	✓	No			
		Yes. Describe			
51.	Any	y farm- and commercial fishing-related property you did	not already list		
	V	No			
	Ħ	Yes. Describe			
	•			Г	
		he dollar value of all of your entries from Part 6, includir . Write that number here			
101 1 6	ai t O	. Write that humber here			
Part	7.	Describe All Property You Own or Have an In	nterest in That You D	id Not List Above	
		you have other property of any kind you did not already		THE PROPERTY OF THE PROPERTY O	
		imples: Season tickets, country club membership			
	✓	No			
		Yes. Give specific			
		information			
				_	
54. A	dd ti	he dollar value of all of your entries from Part 7. Write th	at number here	······	
Part	8:	List the Totals of Each Part of this Form			1
55. P	art '	1: Total real estate, line 2		▶	
56. p	art 2	2 total vehicles, line 5	\$1200.00		
57. P	art 3	3: Total personal and household items, line 15	\$2150.00		
58. P	art 4	l: Total financial assets, line 36	\$92.00		
59. P	art :	5: Total business-related property, line 45			
60. P	art (6: Total farm- and fishing-related property, line 52			
		7: Total other property not listed, line 54			
62. T	otal	personal property. Add lines 56 through 61	\$3442.00	Convenement and the second	+ \$3442.00
				Copy personal property total ▶	
					\$3442.00
63. T 6	otal	of all property on Schedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:							
Debtor 1	Diana		Sanders				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if fili	ng) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois				
			(State)				
Case number							
(If known)							

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	It 1: Identify the Property You Claim as Exempt							
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: Pre-paid card Visa Line from Schedule A/B: 17	\$0.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
	Brief description: Used Furniture Line from Schedule A/B: 06	\$1,200.00	\$1,200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covers No Yes	3 years after that for ca						

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ebtor 1	Diana			Sanders	Case number (if known)	
rt 2:	First Name Additional	Page	Middle Name	Last Name		
Brie line	f description	of the property a A/B that lists this			he exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B			
Brief	f cription:		\$900.00	7		735 ILCS 5/12-1001(b)
	Used Electro	nics			\$900.00	<u> </u>
Line	from edule A/B:	07			fair market value, up to any le statutory limit	
Brief	f					735 ILCS 5/12-1001(b)
desc	cription:		\$92.00	✓	\$92.00	
	with landlord			100% of	fair market value, up to any	_
	from edule A/B:	22			le statutory limit	
Brief			#50.00	_		735 ILCS 5/12-1001(b)
	cription:		\$50.00	✓	\$50.00	
	Misc Jewelry from				fair market value, up to any	_
	edule A/B:	12		applicab	le statutory limit	
Brief			# 4 000 05			735 ILCS 5/12-1001(c)
	cription:		\$1,200.00	✓	\$200.00	
	Ford, Escape	2004		100% of	fair market value, up to any	_
	from	03			le statutory limit	

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					_		
Fill in	this inform	nation to identify your case	9:				
Debto	or 1	Diana		Sanders			
20010		First Name	Middle Name	Last Name			
Debto	or 2						
(Spou	se, if filing	First Name	Middle Name	Last Name			
United	d States B	ankruptcy Court for the:	Northern	District of Illinois			
		,		(State)			
Case (If kno	number						
							Check if this is an
<u>Offi</u>	icial F	Form 106D					amended filing
Sch	hedu	le D: Credit	ors Who Ha	ve Claims Secur	ed by Pro	perty	12/15
	•	•		are filing together, both are equal e entries, and attach it to this forn	•		
•		er (if known).	go, o,		от то тор от шту	adamenta pages,	,
1. [Do any cre	editors have claims secu	ared by your property?				
Г	No. CI	neck this box and submit t	his form to the court with yo	our other schedules. You have nothing	else to report on this f	orm.	
Ī	Yes. F	ill in all of the information	below.	_			
Part 1	List	All Secured Claims					
			or has more than one accur	red claim list the graditar concretch.	Cali man A	Cali man B	Column C
				red claim, list the creditor separately in, list the other creditors in Part 2. As	Column A Amount of claim	Column B Value of	Column C Unsecured
			alphabetical order accordi		Do not deduct the	collateral	portion
					value of collateral.	that supports	If any
						this claim	
	IL Title Lo		Describe the property	that secures the claim:	\$1,000.00	\$1,200.00	\$0.00
		Cermak Rd.					
	Numbe	er Street	Ford, Escape Value: \$	1,200.00 the claim is: Check all that apply.			
			Contingent	the claim is. Oncor all that apply.			
	Chicago		Unliquidated				
	City Who ow	State ZIP Code es the debt? Check one.	Disputed				
	✓ Debt	or 1 only	Nature of lien. Check a	Ill that apply			
	Debt	or 2 only		,			
	Debt	or 1 and Debtor 2 only	car loan)	made (such as mortgage or secured			
		ast one of the debtors and	Statutory lien (such	as tax lien, mechanic's lien)			
	anoth	er ck if this claim relates	Judgment lien from	a lawsuit			
	to a	community debt	Other (including a ri	ght to offset)			
	Date deb incurred	t was	Last 4 digits of accou	nt number 0000			
		Add the dollar value of		A on this name Write that	\$1,000,00		

number here:

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Fill	in this inform	ation to identify your cas	e:					
De	btor 1	Diana		Sanders				
		First Name	Middle Name	Last Name	_			
	btor 2 ouse, if filing)	First Nome	Middle Name	Last Name	_			
(Op	ouse, ii iiiiig,	FIISTName	Middle Name	Lastiname				
Un	ited States Ba	ankruptcy Court for the:	Northern	District of Illinois	_			
Ca	se number			(State)				
	nown)				_			
Of	ficial Fo	orm 106E/F			<u></u>	Cr	neck if this is ar	n amended filing
<u> </u>	shodu	lo E/E: Cro	ditore Who	Have Unsecui	and Claime			
<u> </u>	JIIEUU	ie E/F. Cie	CUITOL S ANTIO	nave onsecui	eu Ciaiiiis			12/15
part 106/ that	y to any exe VB) and on are listed in ies in the bo	cutory contracts or un Schedule G: Executor Schedule D: Creditor	expired leases that could y Contracts and Unexpire s Who Hold Claims Secu	rs with PRIORITY claims and I result in a claim. Also list exec d Leases (Official Form 106G) red by Property. If more space this page. On the top of any	utory contracts on <i>Sch</i> . Do not include any cre is needed, copy the Pa	nedule A/B editors wit art you ne	<i>: Property</i> (O h partially sed ed, fill it out, r	official Form cured claims number the
Par	t 1: List A	All of Your PRIORI	TY Unsecured Claims	5				
1.	Do any cre	editors have priority ur	secured claims against ye	ou?				
	✓ No. G	o to Part 2.						
	Yes.							
2.	listed, ident much as po Continuation	ify what type of claim it is ossible, list the claims in a on Page of Part 1. If more	s. If a claim has both priority a alphabetical order according e than one creditor holds a p	ore than one priority unsecured or and nonpriority amounts, list that to the creditor's name. If you hat particular claim, list the other cred or this form in the instruction book	claim here and show both ve more than two priority litors in Part 3.	n priority an	d nonpriority a	mounts. As
						Total	Priority	Nonpriority

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Debto		ders Case number (if known) Name	
Don't (
Part 2			
3. I	Do any creditors have nonpriority unsecured claims against you		
	No. You have nothing to report in this part. Submit this form to the Yes.	court with your other scriedules.	
		and an of the same Proposed as health and the state of the same Proposed as a second	de a como a como de ade a
		order of the creditor who holds each claim. If a creditor has more to elaim listed, identify what type of claim it is. Do not list claims already in	
		s in Part 3.lf you have more than four priority unsecured claims fill out t	
ı	Page of Part 2.		
			Total claim
4.1	City of Chicago	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name 121 N. LaSalle	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply. Contingent	
	Chicago Illinois 60602		
	City State Zip Code Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	✓ Other. Specify parking tickets	
	Yes		
4.2	ComEd	Last 4 digits of account number	\$600.00
	Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?	
	Number Street		
	Bankruptcy Section	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Oakbrook Terrace Illinois 60181 City State Zip Code	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify Unsecured	
	✓ No		
	Yes		
4.3	CONVERGENT OUTSOURCING Nonpriority Creditor's Name	Last 4 digits of account number 2730	\$625.00
	Po Box 9004	When was the debt incurred? 8/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Renton Washington 98057	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	··	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	001 Collection; Collecting for ORIGINAL CREDITOR:	
	Yes	Other. Specify <u>COMCAST</u>	

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Debtor 1 Diana Sanders Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** CONVERGENT OUTSOURCING 4.4 \$625.00 Last 4 digits of account number _ Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? 8/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent 98057 Renton Washington Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only lacksquareType of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify COMCAST Yes **DIVERSIFIED** 4.5 \$753.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 1391 4/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent 48195 Southgate Michigan Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for |√| **✓** No ORIGINAL CREDITOR: 11 Other. Specify COMCAST Yes 4.6 **DIVERSIFIED** \$753.00 Last 4 digits of account number _ Nonpriority Creditor's Name Po Box 1391 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Michigan 48195 Southgate Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 001 Collection; Collecting for **✓** \checkmark No

Yes

Other. Specify

ORIGINAL CREDITOR: 11

COMCAST

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Debtor 1 Diana Sanders Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** ENHANCED RECOVERY CO 4.7 \$959.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 8/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓ ✓** No Other. Specify ORIGINAL CREDITOR: AT T Yes ENHANCED RECOVERY CO L 4.8 \$833.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 7/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: SPRINT **✓** No Yes ENHANCED RECOVERY CO L 4.9 \$959.00 Last 4 digits of account number 7911 Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 8/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: AT T

No Yes

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Diana Debtor 1 Sanders Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim ENHANCED RECOVERY CO I** 4.10 \$833.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 7/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: SPRINT **✓ ✓** No Yes 4.11 Peoples Gas \$300.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify_ Unsecured Is the claim subject to offset? **✓** No

Yes

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Diana Sanders Debtor 1 Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h.

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

\$8,240.00

\$8,240.00

6j.

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Fill in this information to identify your case:						
Debtor 1	Diana	Diana				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing) First Name		Middle Name Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)	-		(Oldio)			

Official Form 106G

Check if this is an
amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	East Lake Management Name			Residential Lease, Debtor is Lessee, One year lease, expires 4/1/17
	200 N. Dearborn St.			
	Number	Street		
	Chicago	Illinois	60601	
	City	State	Zip Code	

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Fill in this inform	nation to identify your cas	e:		
Debtor 1	Diana		Sanders	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filin	(1) First Name	Middle Name	Last Name	_
(000000)	9/ Filst Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	_
Case number			(State)	
(If known)				
				Check if this is an amended filing
Official	Earm 1064			amended illing
	Form 106H			
Schedu	le H: Your C	odebtors		12/15
1. Do you ha	ave any codebtors? (If y	ou are filing a joint case, do	not list either spouse as a codek	otor.)
Idaho, Lou No. 0	isiana, Nevada, New Mex Go to line 3.	ico, Puerto Rico, Texas, Was	shington, and Wisconsin.)	munity property states and territories include Arizona, California,
	Dia your spouse, former s No	pouse, or legal equivalent liv	e with you at the time?	
		state or territory did you live?	Fill in the	e name and current address of that person.
	Name of your spouse, f	ormer spouse, or legal equiv	ralent	
	Number Street			
	City	State	Zip Code	
again as a	codebtor only if that p	erson is a guarantor or co	signer. Make sure you have l	spouse is filing with you. List the person shown in line 2 isted the creditor on Schedule D (Official Form 106D), D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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					-		
Fill in this	information to identif	y your case:					
Debtor 1	Diana		Sanders				
	First Name	Middle Name	Last Nam	е	-		
Debtor 2					_	Check if this is:	
(Spouse, if fi	iling) First Name	Middle Name	Last Nam	е		An amended filing	
United State	es Bankruptcy Court for the:	Northern	District of Illino	is			ng post-petition chapter 13
			(State	e)	_	expenses as of the fo	illowing date:
Case number (If known)	er				_	MM / DD / YYYY	_
Officia	l Form 106l						
	ule I: Your Inc	rome					42/45
Scried	ule i. Tour inc	Joine					12/15
additional		r spouse. If more spac ame and case number					
1. F	Fill in your employment		Debtor 1			Debtor 2	
i	nformation.	Employment status					
li li	f you have more than one	Employment status	✓ Employed			Employed	
	ob,		Not Emplo	oyed		Not Employed	
	attach a separate page with nformation about additional	Occupation	Packing			_	
€	employers.	Employer's name	Highland Bak	ing Co			
li	nclude part time, seasonal,	Employer's address	2301 Sherme				
	or self-employed work.	Employer's address	Number Street	TNU		Number Street	
(Occupation may include		-				
	student or homemaker, if it applies.		-			_	
	эт потпетнаког, и и аррисо.		Northbrook City	Illinois State	60062 Zip Code	Citv	State Zip Code
			•	Otato	Zip Code	•	·
		How long employed there?	3 months				-
Part 2:	Give Details About	Monthly Income					
Estimate r	•	date you file this form. If you	u have nothing to	report for any	line, write \$0 in	the space. Include your n	on-filing spouse unless
, ,	our non-filing spouse have more parate sheet to this form.	ore than one employer, combin	e the information	for all employe	ers for that perso	on on the lines below. If yo	u need more space,
				For D	ebtor 1	For Debtor 2 or non-filing spouse	
		ry, and commissions (before alculate what the monthly wage			\$1,594.67		
3. Estim	nate and list monthly over	time pay.	3.		+ \$0.00		

\$1,594.67

4. Calculate gross income. Add line 2 + line 3.

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Deptor 1 Diana		Sanuers	Case number	(if known)	
First Name	e Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		4.	\$1,594.67		
5. List all payroll de	eductions:				
	re, and Social Security deductions	5a.	\$160.33		
5b. Mandatory o	contributions for retirement plans	5b.	\$0.00		
5c. Voluntary co	ontributions for retirement plans	5c.	\$0.00		
5d. Required re	payments of retirement fund loans	5d.	\$0.00		
5e. Insurance		5e.	\$0.00		
5f. Domestic su	pport obligations	5f.	\$0.00		
5g. Union dues		5g.	\$0.00		
5h. Other deduc	ctions. Specify:	5h. +	\$0.00 +	·	
6. Add the payroll of +5h.	deductions. Add lines 5a + 5b + 5c + 5d + 5e +	-5f + 5g 6.	\$160.33		
7. Calculate total m	nonthly take-home pay. Subtract line 6 from line	e 4. 7.	\$1,434.33		
8. List all other inco	ome regularly received:				
business, pr	from rental property and from operating a rofession, or farm				
	ement for each property and business showing gnary and necessary business expenses, and the come.		\$0.00		
8b. Interest and	dividends	8b.	\$0.00		
dependent re Include alimo	ort payments that you, a non-filing spouse, egularly receive ny, spousal support, child support, maintenance,				
	ment, and property settlement.	8c.	\$433.00		
	ent compensation	8d.	\$0.00		
8e. Social Secur	•	8e.	\$0.00		
Include cash a assistance tha the Suppleme subsidies	nment assistance that you regularly receive assistance and the value (if known) of any non-cauty you receive, such as food stamps (benefits understal Nutrition Assistance Program) or housing	ler			
	d Assistance Programs Income	_	\$771.00		
· ·	retirement income	8g.	\$0.00		
	nly income. Specify:				
9. Add all other inc	come Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g	+ 8h. 9.	\$1,204.00		
	nly income. Add line 7 + line 9. n line 10 for Debtor 1 and Debtor 2 or non-filing s	10. spouse	\$2,638.33 +	=	\$2,638.33
Include contribution relatives.	egular contributions to the expenses that young from an unmarried partner, members of your my amounts already included in lines 2-10 or amounts	household, your de	ependents, your roommates	•	
Specify:	., aa.no anoday moddod m moo z 10 01 dillo	and that are not ave	ما ما مادان المادان المادان المادان	11.	. + \$0.00
					· <u> </u>
	nt in the last column of line 10 to the amount ton the Summary of Schedules and Statistical St				\$2,638.33
					Combined monthly income
13. Do you expect a	an increase or decrease within the year after	you file this form?	?		
Yes. Explain					
Tes. Explain					

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Fill in this inform	nation to identify your ca	se:				
Debtor 1	Diana		Sanders			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing	First Name	Middle Name	Last Name	Check if this is: An amended filing	ר	
United States B	ankruptcy Court for the:	Northern	District of Illinois	A supplement sho	owing post-petition chapter 13	
Case number			(State)	expenses as of th		
,	- 4001			MM / DD / YYYY	,	
	Form 106J					
Schedul	e J: Your Ex	kpenses			1	2/15
information. If n	nore space is needed,		e filing together, both are equally form. On the top of any additiona			
	ver every question. cribe Your Househ	old				
1. Is this a join						
_	to line 2					
Yes. Do	es Debtor 2 live in a s	eparate household?				
	No					
	Yes. Debtor 2 must fil	e Official Forms 106J-2, <i>Expen</i>	ses for Separate Household of Debto	or 2.		
2. Do you have dependents?	e 🔲 N	lo				
Do not list De		es. Fill out this information for ach dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?	
			Child Child	1 year	No.	
			Child	2110000	✓ Yes. No.	
			Child	3 years	✓ Yes.	
			Child	9 years	No.	
			Child	11 years	✓ Yes. No.	
			Criliu	11 years	✓ Yes.	
3. Do your exp	المالما	lo.				
expenses of than		es				
yourself and dependents	your 🗀	c s				
Part 2: Estin	nata Vaur Ongoine	g Monthly Expenses				
			you are using this form as a supp	loment in a Chanter 1	2 coco to roport	
_	f a date after the bank		plemental Schedule J, check the	•	-	
	•	cash government assistance it on Schedule I: Your Income	•		Your expenses	
	or home ownership ex the ground or lot. 4.	penses for your residence. In	clude first mortgage payments and		4.	00
•	uded in line 4:				٦.	
4a. Real es	tate taxes				4a \$0.	00
4b. Propert	y, homeowner's, or rente	er's insurance			4b. \$0.	00
4c. Home n	naintenance, repair, and	upkeep expenses			4c. \$0. 0	00
4d. Homeo	wner's association or co	ndominium dues			4d. \$0. 0	00

Schedule J: Your Expenses

page 1

Official Form 106J

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Sanders

Debtor 1

Diana

Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$150.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$250.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies 7. \$771.00 8. Childcare and children's education costs \$50.00 8. 9. Clothing, laundry, and dry cleaning 9. \$275.00 10. Personal care products and services 10. \$275.00 11. Medical and dental expenses \$25.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$425.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$85.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$150.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: Partking ticket repayment \$139.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Diana		Sanders	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other.	. Specify:				21	\$0.00
22. Calcu	ılate your monthly e	xpenses.				\$2,635.00
22a. A	dd lines 4 through 21					\$0.00
22b. C	Copy line 22 (monthly o	expenses for Debtor 2), if any, fro	m Official Form 106J-2			\$2,635.00
22c. A	dd line 22a and 22b.	The result is your monthly expens	ses.		22.	Ψ2,000.00
23.Calcu	late your monthly n	et income.				
23a. C	Copy line 12 (your com	bined monthly income) from Sch	edule I.		23a	\$2,638.33
23b. C	copy your monthly exp	enses from line 22 above.			23b	\$2,635.00
		expenses from your monthly inco	ne.			\$3.33
-	The result is your mor	nthly net income.			23c	
24. Do yo	ou expect an increas	se or decrease in your expens	es within the year after yo	u file this form?		
		ct to finish paying for your car loar ease or decrease because of a n	, ,			
✓ N	No					
	′es					
_	Explain here:					
	·					
	L					

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Fill in this information to identify your case:							
Debtor 1	Diana		Sanders				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing) First Name		Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois (State)				
Case number (State) (If known)							

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below		
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?		
	☑ No		
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.		
	·		
X	/s/ Diana Sanders	*	
	Signature of Debtor 1	Signature of Debtor 2	
	Date 9/29/2016	Date	
	MM/DD/YYYY	MM/DD/YYYY	

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Fill	in this ir	nform	ation to identify your cas	se:						
						Condon				
Det	otor 1		Diana First Name	Middle	Name	Sanders Last Nam	ne	_		
Del	otor 2						-			
(Sp	ouse, if	filing)	First Name	Middle	Name	Last Nan	ne	_		
Uni	ted Stat	tes Ba	inkruptcy Court for the:	Northern		District of Illino		_		
	se numb nown)	oer				(Sta		_		
Of	ficia	al F	orm 107							Check if this is a amended filing
St	aten	nei	nt of Financ	ial Affair	s for	Individu	als Filir	ng for Ba	ankruptcy	12/1
										orrect information. If more move in the more in the mo
ques	stion.		•			•				,
Par	t 1: G	ive	Details About You	r Marital Statı	us and \	Where You Liv	ed Before			
1.	Wha	at is v	our current marital st	eatus?						
٠.	_	-		.atus :						
		Marr								
	V	INOL I	narried							
2.	Duri	ing th	e last 3 years, have yo	ou lived anywhere	e other th	an where you live	now?			
	~	No								
		Yes. I	List all of the places you	lived in the last 3 y	ears. Do r	not include where y	ou live now.			
		Debt	or 1:		Dates there	Debtor 1 lived	Debtor 2:			Dates Debtor 2 lived there
							☐ Same	as Debtor 1		Same as Debtor 1
							Game	as Debior 1		Garrie as Debtor 1
		Numl	per Street		From		Number St	treet		From
			501 011001		То					То
		City	State	Zip Code			City	State	Zip Code	
	_						Same	as Debtor 1		Same as Debtor 1
							_			_
		Numl	per Street		From		Number St	treet	_	From
					То					To
		City	State	Zip Code			City	State	Zip Code	
_	140-1									
3.			l ast 8 years, did you e clude Arizona, California	-						munity property states and
	_		olado / lizoria, Odiiloli li	a, radiro, Lodioidi id	., : +0 vaua,	1 45 W IVIONIOU, I UC	, ICAA	o, vvaoriingion, ai	14 T T T T T T T T T T T T T T T T T T T	
	N		,			, , <u>, , , , , , , , , , , , , , , , , </u>				
	☐ Ye	es. Ma	ake sure you fill out Sche	eaule H: Your Cod	ebtors (Of	ticial Form 106H).				

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Debt	or 1	Diana	Sander		umber (if known)	
		First Name Middle		me		
Part	2:	Explain the Sources of Your I	ncome			
	Fill i	you have any income from employm n the total amount of income you receive rities. If you are filing a joint case and you No Yes. Fill in the details.	ed from all jobs and all busine	esses, including part-time		ears?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$5183.64	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31, 2015 YYYY	Wages, commissions, bonuses, tips Operating a business		Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2014	Wages, commissions, bonuses, tips Operating a business	\$8000.00	Wages, commissions, bonuses, tips Operating a business	
l b	nclui pene case	you receive any other income during de income regardless of whether that income fit payments; pensions; rental income; in and you have income that you received that source and the gross income from the No Yes. Fill in the details.	come is taxable. Examples of sterest; dividends; money colle together, list it only once unde	other income are alimony; chected from lawsuits; royalties r Debtor 1.	; and gambling and lottery winn	
	·		Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	_		Link	\$6,939.00		
		rom January 1 of current year until he date you filed for bankruptcy:	Child Support	\$3,900.00		
	_		Link	\$9,252.00		
		for last calendar year: January 1 to December 31, 2015) YYYY	Child Support	\$5,200.00		
		For the calendar year before that: January 1 to December 31,2014)	Link	\$6,660.00		
		YYYY	Child Support	\$5,200.00		

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First Name		Middle Name	Last Name	Case nu	ilibei (ii khowii)	
List Cer	tain Paymer	nts You Made I	Before You Filed fo	r Bankruptcy		
a aithar Daht	or 1's or Debt	or 2's debts prim:	arily consumer debts?			
_		-	-			
		r Debtor 2 has pri al, family, or househ	_	. Consumer debts are define	ed in 11 U.S.C. § 101(8) as "ind	curred by an individual
During	the 90 days be	fore you filed for ba	nkruptcy, did you pay any	creditor a total of \$6,425* or	more?	
☐ N	o. Go to line 7.					
☐ Y	total amour	nt you paid that cred	ditor. Do not include paym	25* or more in one or more p ents for domestic support ob to an attorney for this bankr	oligations, such as	
* Subje	ect to adjustmen	nt on 4/01/19 and ev	very 3 years after that for c	ases filed on or after the date	e of adjustment.	
Yes. Debto	r 1 or Debtor 2	2 or both have pri	imarily consumer debts	š.		
•		_	-		uro?	
_	•	nore you illed for ba	rikrupicy, dia you pay any	creditor a total of \$600 or mo	ne:	
✓ N	o. Go to line 7.					
	that credito	r. Do not include pa		or more and the total amour port obligations, such as chil this bankruptcy case.		
			Dates of payment	Total amount paid	Amount you still owe	Was this payment
				-		for Mortgage
Creditor's I	Name					Car
Number St	reet					Credit card
						Loan repayme
City	State	Zip Code				Suppliers or
City	Sidle	Zip Code				vendors Other
					_	Mortgage
Creditor's I	Name					Car
Number St	reet					Credit card
						Loan repayme
<u> </u>						Suppliers or
City	State	Zip Code				vendors
						Other
Creditor's I	Name					☐ Mortgage ☐ Car
Number St	reet					Credit card
						Loan repayme
C:t	01-1-	7:- C - 1-				Suppliers or
City	State	Zip Code				vendors
						Other

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ebtor 1	Diana First Name	Middle Name		nders Name	Case number (ii	f known)
,						
Insid corp ager	hin 1 year before you filed for ders include your relatives; any porations of which you are an of int, including one for a business in as child support and alimony.	general partners; ficer, director, per	relatives of any grown in control, or	eneral partners; par owner of 20% or mo	tnerships of which yere of their voting sec	ou are a general partner; curities; and any managing
	No Yes. List all payments to an ins	sider.				
	, , , , , , , , , , , , , , , , , , ,		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
	Number Street					
_	City State	Zip Code				
	Insider's Name					
	Number Street					
	City State	Zip Code				
insid				payments or trans	fer any property oi	n account of a debt that benefited an
	No Yes. List all payments that bene	efited an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
						Include creditor's name
	Insider's Name					
	Number Street					
-	City State	Zip Code				
	Insider's Name					
	Number Street					
	City State	Zip Code				
		•				<u> </u>

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Deb	otor 1				Sanders	c	Case number (if	known)	
		First Name	Middle Name		Last Name				
Part	t 4:	Identify Legal	Actions, Repossess	sions, a	and Foreclosure	es			
		•	u filed for bankruptcy, v				n. or adminis	trative proceedi	ng?
	List a								r custody modifications, and
		No							
		Yes. Fill in the detail:	S.						
				Nature	of the case	Court or a	agency		Status of the case
		Case title							Pending
						Court Nan	ne		On appeal
		Case number				<u></u>			Concluded
						NumberSt	reet		Constauct
						City	State	Zip Code	
		Case title							Pending
						Court Nan	ne		On appeal
		Case number				NumberSt	reet		Concluded
							.001		
						City	State	Zip Code	
		Yes. Fill in the infor	mation below.		Describe the prop	erty		Date	Value of the
									property
		Creditor's Name							
					Explain what happ	pened			
		Number Street							
		-			Property was re	•			
					Property was g				
		City	State Zip Code	<u>е</u>		ttached, seized,	or levied.		
					Describe the prop	erty		Date	Value of the property
									1 11 3
		Creditor's Name							
					Explain what happ	pened			
		Number Street			_				
					Property was re				
					Property was for				
		City	State Zip Code	<u>——</u>	Property was g	arnisned. ttached, seized,	or levied		
		- ·- <i>y</i>	p 5000	-		, 00,			

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Deb	tor 1	Diana First Name Middle Name		Sanders Last Name	Case number (if known)		
11.		hin 90 days before you filed for bankrup ounts or refuse to make a payment becau	cy, did an		pank or financial institution, s	set off any amou	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account r	number: XXXX-		
		City State Zip Co	de				
12.		hin 1 year before you filed for bankruptc ointed receiver, a custodian, or another		of your property in the	possession of an assignee f	or the benefit of	creditors, a court-
	✓	No Yes					
Part		List Certain Gifts and Contribut					
13.	Wi	ithin 2 years before you filed for bankrup	tcy, did yc	ou give any gifts with a t	otal value of more than \$600	per person?	
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$6 per person	00	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Co Person's relationship to you	de				
		Person to Whom You Gave the Gift					
		Number Street					
		City State Zip Co Person's relationship to you	de				

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Deb	tor 1	Diana	Sanders (Case number (if known)		
		First Name Middle Name	Last Name			
14.	Wit	hin 2 years before you filed for bankruptcy, did yo	ou give any gifts or contributions y	vith a total value of r	nore than \$600 t	o any charity?
• • •		No	ou give any give or commoditions .	Third total value of t		o any onany i
	뇓	Yes. Fill in the details for each gift or contribution.				
	ш	-	December of the second state of		D-1	Makes
		Gifts or contributions to charities that total more than \$600	Describe what you contributed		Date you contributed	Value
		that total more than \$600			contributed	
		0				
		Charity's Name				
		Number Street				
		Trainibor Greek				
		City State Zip Code				
				·		
Part	6:	List Certain Losses				
15	With	nin 1 year before you filed for bankruptcy or since	you filed for bankruptcy, did you	lose anything becau	ise of theft fire	other disaster or
10.		ibling?	s you med for bankruptcy, did you	lose arrytriing becat	ise of their, me,	other disaster, or
		No				
	Ħ	Yes. Fill in the details.				
	ш	Describe the property you lost and	Describe any insurance coverage	ne for the loss	Date of your	Value of property
		how the loss occurred	Include the amount that insurance		loss	lost
			pending insurance claims on line 3	3 of Schedule		
			A/B: Property.			
Part		List Certain Payments or Transfers				
		ut seeking bankruptcy or preparing a bankruptcy de any attorneys, bankruptcy petition preparers, or cru No Yes. Fill in the details.		required in your bankr	uptcy.	
	ш		Description and value of any pr	onerty	Date payment	Amount of
			transferred	operty	or transfer	payment
					was made	
		Person Who Was Paid				
		Number Street				
		City State Zip Code				
		Email or website address				
		Person Who Made the Payment, if Not You				
		,				
		Person Who Was Paid				
		Number Street				
		City State 7'm Cod-				
		City State Zip Code				
		Email or website address				
		Person Who Made the Payment, if Not You				

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Debt	or 1	Diana		Sanders	Case number (if known	n)	
		First Name	Middle Name	Last Name			
17.	help	nin 1 year before you filed to you deal with your credito not include any payment or train. No Yes. Fill in the details.	ors or to make paymen		your behalf pay or transfe	any property to any	one who promised to
	ш	roc. i iii iii are dotaile.				5 .	
				Description and value of transferred	of any property		Amount of payment
		Person Who Was Paid					
		Number Street					
		011	7'- 0-1-				
		City State	Zip Code				
	✓	No Yes. Fill in the details.		Description and value of property transferred	of any Describe an	ny property or received or debts pa	Date id transfer was
				property transferred	in exchang		made
		Person Who Received Tran	nsfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Tran	nsfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		nin 10 years before you file se are often called asset-pro		you transfer any property to	o a self-settled trust or sim	ilar device of which	you are a beneficiary?
	✓	No Yes. Fill in the details.					
	_			Description and value	of the property transferre	d	Date transfer was made
		Name of trust					

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Debtor 1	Diana First Name Middle Name	Sanders Last Name	Case number (if known)		
Part 8:	List Certain Financial Accounts, I		loves and Storage Units		
20. Wit mo Incl	thin 1 year before you filed for bankruptcy, ved, or transferred? ude checking, savings, money market, or othe operatives, associations, and other financial ins	were any financial accounts or in	struments held in your name, o	-	ds,
	No Yes. Fill in the details.	Last 4 digits of account	Type of account or instrument	Date Last balan account was before	nce
		number	iiisti ulilett	closed, sold, closing or moved, or transfer transferred	r
	Person Who Was Paid	XXXX-	Checking Savings		_
	Number Street	_	Money market Brokerage Other		
	City State Zip Code	<u> </u>			
	Person Who Was Paid	XXXX-	Checking Savings		_
	Number Street		Money market Brokerage Other		
	City State Zip Code				
	you now have, or did you have within 1 ye er valuables? No Yes. Fill in the details.				
		Who else had access to it?	Describe the co	ntents Do you st have it?	ill
	Name of Financial Institution	Name		No Yes	
	Number Street	Number Street			
	City State Zip Code	City State 2 —	Zip Code		
22. Hav	ve you stored property in a storage unit or	place other than your home within	n 1 vear before vou filed for bar	nkruptcv?	
✓	No Yes. Fill in the details.	,	,,		
		Who else had access to it?	Describe the co	ntents Do you st have it?	till
	Name of Storage Facility	Name		☐ No ☐ Yes	
	Number Street	Number Street	Tip Code	LI tes	
	City State Zip Code	City State Z –	Zip Code		

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ebtor 1		5			e number (if known)	
	First Name Middle Name	L	ast Name			
rt 9:	Identify Property You Hold or Conti	rol for Som	eone Else			
		_				_
	 you hold or control any property that somed meone. 	one else owns	? Include any	property you b	oorrowed from, are storing for, or hold i	n trust for
30						
✓	No					
	Yes. Fill in the details.					
		Where is t	he property?		Describe the contents	Value
				_		
	Owner's Name	Number Str	eet			
	Number Street					
	Namber Cheek					
		City	State	Zip Code		
		- ,		,		
	City State Zip Code					
art 10	Give Details About Environmental	Informatio	n			
	-					
or the	purpose of Part 10, the following definitions apply	r:				
•	Environmental law means any federal, state, or lo	ocal statute or re	egulation conc	erning pollution, o	contamination, releases of	
	hazardous or toxic substances, wastes, or materia					
	including statutes or regulations controlling the cl	eanup of these	substances, v	vastes, or materia	al.	
-	Site means any location, facility, or property as def	fined under any	environmental	law, whether you	now own, operate, or utilize it	
	or used to own, operate, or utilize it, including dis	posal sites.				
	Hazardous material means anything an environme	ental law define	s as a hazardo	ous waste, hazard	lous substance,	
•	Hazardous material means anything an environme toxic substance, hazardous material, pollutant, co			ous waste, hazard	lous substance,	
-	toxic substance, hazardous material, pollutant, co	ontaminant, or s	imilar term.		lous substance,	
-		ontaminant, or s	imilar term.		lous substance,	
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn	ontaminant, or s now about, regar	imilar term. rdless of when	they occurred.		
■ eport	toxic substance, hazardous material, pollutant, co	ontaminant, or s now about, regar	imilar term. rdless of when	they occurred.		
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you No	ontaminant, or s now about, regar	imilar term. rdless of when	they occurred.		
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows any governmental unit notified you that you	ontaminant, or s now about, regar	imilar term. rdless of when	they occurred.		
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you No	ontaminant, or s now about, regar	imilar term. rdless of when le or potentia	they occurred.		Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you No	ontaminant, or s now about, regal	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you notified you that you notified you that you not not notified you that you not	ontaminant, or s now about, regal ou may be liabl Governme	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you No	ontaminant, or s now about, regal	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you notified you that you notified you that you not not notified you that you not	ontaminant, or s now about, regal ou may be liabl Governme	rdless of when le or potential unit	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a likely substantial with the details. Name of site	ontaminant, or s now about, regar ou may be liabl Governme	rdless of when le or potential unit	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a likely substantial with the details. Name of site	ontaminant, or s now about, regar ou may be liabl Governme	rdless of when le or potential unit	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have any governmental unit notified you have any governmental unit notified you have any governmental unit notified you that you have any governmental unit notified	Governme Governmen Number Streen	cimilar term. rdless of when the or potentia tental unit tental u	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a likely substantial with the details. Name of site	Governme Governmen Number Streen	cimilar term. rdless of when the or potentia tental unit tental u	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you have as any governmental unit notified you that you have as any governmental unit notified you that you have any governmental unit notified you have any governmental unit notified you have any governmental unit notified you that you have any governmental unit notified	Governme Governme Number Street	rdless of when the or potential unit the et	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any	Governme Governme Number Street	rdless of when the or potential unit the et	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any No	Governme Governme Number Street	rdless of when the or potential unit the et	they occurred.	or in violation of an environmental law?	Date of
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any	Government Street City Trelease of ha	cimilar term. rdless of when the or potential ental unit the eet State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any No	Governme Governme Number Street	cimilar term. rdless of when the or potential ental unit the eet State	they occurred.	or in violation of an environmental law?	Date of notice
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any No	Government Street City Trelease of ha	cimilar term. rdless of when the or potential ental unit the eet State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have	Governme Governme City Governme Governme	ental unit State State State State State State State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you knows as any governmental unit notified you that you No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any No	Government Street City Trelease of ha	ental unit State State State State State State State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have you notified any governmental unit of any have you have	Governme Governme City Governme Governme	ental unit State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you notified any governmental unit of any have you have you notified any governmental unit of any have you not site Name of site	Governme Governme Governme Governme City Governme Governme	ental unit State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you notified any governmental unit of any have you have you notified any governmental unit of any have you not site Name of site	Governme Governme Governme Governme City Governme Governme	ental unit State	they occurred.	or in violation of an environmental law? Environmental law, if you know it	Date of notice
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you notified any governmental unit of any have you have you notified any governmental unit of any have you not site Name of site	Governmen Governmen Governmen Governmen Number Stree Governmen Governmen Number Stree Governmen	rdless of when rdless of when rdless of when rental unit retal uni	zip Code	or in violation of an environmental law? Environmental law, if you know it	Date of notice

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Deb	otor 1	Diana			Sanders	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	/ in any judici	al or administra	tive proceeding under	any environmenta	al law? Include settlements and order	S.
	✓	No						
		Yes. Fill in the deta	ils.					
				(Court or agency		Nature of the case	Status of the case
		Case title						_
					Court Name			Pending
				`	Sourt Name			On appeal
		Case number			Number Street	_		Concluded
				.	City State	Zip Code		
		 	L (V	D!		·		
Par	t 11:	Give Details A	about Your	Business or	Connections to An	ly Business		
27.	With	nin 4 years before	you filed for I	oankruptcy, did	you own a business or	have any of the fo	ollowing connections to any business	?
		_				-		
				-	profession, or other activit		r part-time	
		=		company (LLC)	or limited liability partners	ship (LLP)		
		A partner in a						
			_	ing executive of a				
		An owner of at	t least 5% of th	e voting or equity	securities of a corporatio	n		
	./	No. None of the abo	ove annlies Go	to Part 12				
	Ħ				below for each business			
	ш	roo. Orrook all triat	appiy abovo ai		Describe the natu		Employer Identification n	umbor Do not
					Describe the natu	ire of the busines	Employer Identification n include Social Security nu	
		Business Name			_		EIN:	
		Number Street			Name of account	ant ar baaldraana	Dates business existed	
					Name of account	апт ог рооккеере		
		City	State	Zip Code			FromTo	
					Describe the natu	re of the busines	1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
							include Social Security nu	ımber or ITIN.
		Business Name			_		EIN:	
		Daoiness Name						
		Number Street			_		Dates business existed	
					Name of account	ant or bookkeepe		
		City	State	Zip Code			From To	
					Describe the natu	ıre of the busines	Employer Identification n include Social Security nu	
								imber of friit.
		Business Name			-		EIN:	
					_			
		Number Street			Name of account	ant or bookkeepe	Dates business existed	
					- Ivaine or account	ан ог вооккеере		
		City	State	Zip Code			FromTo	

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Debt	tor 1	Diana			Sanders	Case number (if known)
		First Name		Middle Name	Last Name	
		litors, or other parti	ies.	bankruptcy, did yo	ມ give a financial stateme	nt to anyone about your business? Include all financial institutions,
	Ш	Yes. Fill in the details	s below.			
					Date issued	
		News			MM/DD/YYYY	
		Name			IVIIVI/DD/TTTT	
		Number Street			•	
		Number Street				
		City	State	Zip Code	•	
		•	Oldio	Zip Codo		
Part	12:	Sign Below				
t	rue a	and correct. I under ruptcy case can res	stand that n	naking a false state up to \$250,000, or in	ement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
			re of Debtor			Signature of Debtor 2
						Date
		Date 9	/29/2016			
	Did y	ou attach additiona	I pages to \	our Statement of F	inancial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
Г	. . /	No				
	Ξ.					
L	`	⁄es				
[Did y	ou pay or agree to p	pay someon	e who is not an atte	orney to help you fill out I	pankruptcy forms?
Г	7 N	No				
ľ		es. Name of person				Attach the Bankruptcy Petition Preparer's Notice,
L.						Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:						
Debtor 1	Diana		Sanders			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filir	ng) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number (If known)						

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: IL Title Loans Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Ford, Escape | Value: \$1,200.00 Retain the property and [explain]: No. Surrender the property. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debto	or Diana		Sanders	Case number (if
1	First Name	Middle Name	Last Name	known)
!- (V-	U	wal Barranto I areas		Part 2:
		nal Property Leases		
inform	ation below. Do not list r		leases are leases that ar	y Contracts and Unexpired Leases (Official Form 106G), fill in the re still in effect; the lease period has not yet ended. You may assume 365(p)(2).
De	escribe your unexpired p	ersonal property leases		Will the lease be assumed?
Le	ssor's name:			No Yes
	escription of leased operty:			
Le	ssor's name:			No Yes
	escription of leased operty:			
Le	ssor's name:			No Yes
	escription of leased operty:			
Le	ssor's name:			No Yes
	escription of leased operty:			
Le	ssor's name:			No Yes
	escription of leased operty:			
Le	ssor's name:			☐ No ☐ Yes
	escription of leased operty:			
Le	ssor's name:			No Yes
	escription of leased operty:			
Part 3:	Sign Below			
Und			ny intention about any p	roperty of my estate that secures a debt and any personal
			•	
-	/s/ Diana Sanders Signature of Debtor 1		×	nature of Debtor 1
	Date 9/29/2016		Dat	
ı	MM/DD/YYYY		Dai	MM/DD/YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Diana Sanders		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF CO	MPENSATION OF	ATTORNEY FO	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. that compensation paid to me within one services rendered or to be rendered on bis as follows:	year before the filing of the	petition in bankruptcy, or	agreed to be paid to me, for
	For legal services, I have agreed to acce	ept		\$1,400.00
	Prior to the filing of this statement I have	e received		\$0.00
	Balance Due			\$1,400.00
2.	The source of the compensation paid to	me was:		
	✓ Debtor	Other (specify)		
3.	The source of the compensation paid to	me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share the above members and associates of my law	e-disclosed compensation wit firm.	th any other person unles	s they are
	I have agreed to share the above-dismembers or associates of my law fithe people sharing in the compensation	rm. A copy of the agreement		
5.	In return for the above-disclosed fee, I h a. Analysis of the debtor's financial s bankruptcy;	-		· · · · · · · · · · · · · · · · · · ·
	b. Preparation and filing of any petit	tion, schedules, statements o	of affairs and plan which r	nay be required;
	c. Representation of the debtor at th	ne meeting of creditors and co	onfirmation hearing, and a	any adjourned hearings thereof;
6.	By agreement with the debtor(s), the abo	ove-disclosed fee does not in	clude the following servic	es:
		CERTIFICATION		
	I certify that the foregoing is a complete s ne debtor(s) in this bankruptcy proceeding		or arrangement for payme	ent to me for representation
	9/29/2016		/s/ Elizabeth Placek	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Sanders, Diana	Case No.	Case No		
_	Debtor(s)				
		Chapter	Chapter7		
	VERIFIC	ATION OF CREDITOR MAT	RIX		
	The above named Debtors hereby verify t	that the attached list of creditors is true	and correct to the best of their	knowledge.	
Date:	9/29/2016	/s/ Sanders, Diar	a		
<u></u>	3/23/2010	Sanders, Diana	<u> </u>		
		Signature of Deb	tor		

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256 USA

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256 USA

DIVERSIFIED Po Box 1391 Southgate , MI 48195 USA

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON , WA 98057 USA

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256 USA

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256 USA

DIVERSIFIED Po Box 1391 Southgate , MI 48195 USA

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON , WA 98057 USA

City of Chicago 121 N. LaSalle Chicago , IL 60602 USA

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace , IL 60181 USA

Peoples Gas 200 E. Randolph Chicago , IL 60601 USA

IL Title Loans 3159 W. Cermak Rd. Case 16-31091 Doc 1 Filed 09/29/16 Entered 09/29/16 16:18:56 Desc Main Document Page 58 of 64

Chicago , IL 60623 USA

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Debtor 1 Diana First Name	Middle Name	Sanders Last Name	Case number (if know	wn)
	uestions for Reporting Pu			
16. What kind of debts do you have?	16a. Are your debts prim 101(8) as "incurred b No. Go to line 16 Yes. Go to line 1 16b. Are your debts prim	narily consumer de by an individual prim b. 7. narily business del usiness or investme c. 7.	arily for a personal, fants: ots? Business debts and or through the ope	are defined in 11 U.S.C. § amily, or household purpose." are debts that you incurred to eration of the business or or business debts.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be a		after any exempt property nsecured creditors?	is excluded and administrative expenses are
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5 5,001-1 10,001-		25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$10,000 \$50,000	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$10,000 \$50,000	001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For you	and correct. If I have chosen to file und 11,12, or 13 of title 11, Uni choose to proceed under C If no attorney represents n me fill out this document, I I request relief in accordant I understand making a fals	ler Chapter 7, I am a ted States Code. I us chapter 7. The and I did not pay have obtained and ce with the chapter e statement, conceating case can result in \$ 152, 1341, 1519,	aware that I may produce nderstand the relief a or agree to pay some read the notice required title 11, United Stalling property, or obtain fines up to \$250,00	attes Code, specified in this petition. aining money or property by fraud in 10, or imprisonment for up to 20 of Debtor 2

Voluntary Potition for Individuals Filing for Pontrumter

Official Form 101

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Fill in this inf				
ARREST AREA DESCRIPTION AND ARREST	formation to identify your cas	e:		
Debtor 1	Diana		Sanders	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if f	iling) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	Northern	District of Illinois	
Casa mumah			(State)	
Case number (If known)	er			
Officia	l Form 106De	С	-	Check if this is a amended filing
Declar	ation About a	n Individual De	ebtor's Schedules	12/1
If two marrie	ed people are filing together	r. both are equally respons	ible for supplying correct information.	
Tou must me	e this form whenever you t	ile bankruptcy schedules of	r amended schedules. Making a false st	atement, concealing property or obtaining
money or pr	operty by fraud in connect 1519, and 3571.	ile bankruptcy schedules o ion with a bankruptcy case	r amended schedules. Making a false st can result in fines up to \$250,000, or im	atement, concealing property, or obtaining prisonment for up to 20 years, or both. 18 U.S.C
money or pr §§ 152, 1341, Part 1: Si	operty by fraud in connect 1519, and 3571. gn Below	ion with a bankruptcy case	r amended schedules. Making a false st can result in fines up to \$250,000, or im	atement, concealing property, or obtaining prisonment for up to 20 years, or both. 18 U.S.C
money or pr §§ 152, 1341, Part 1: Si	operty by fraud in connect 1519, and 3571. gn Below upay or agree to pay some	ion with a bankruptcy case	can result in fines up to \$250,000, or im	atement, concealing property, or obtaining prisonment for up to 20 years, or both. 18 U.S.C
Part 1: Si	operty by fraud in connect 1519, and 3571. gn Below upay or agree to pay some	ion with a bankruptcy case	can result in fines up to \$250,000, or im	prisonment for up to 20 years, or both. 18 U.S.C

MM/DØ/YYYY

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Debtor 1		Middle N	Sanders	Case number (if known)
	First Name	Middle Name	Last Name	
	ithin 2 years before yo editors, or other partie No Yes. Fill in the details l	s.	id you give a financial statem	ent to anyone about your business? Include all financial institutions,
			Date issued	
				_
	Name		MM/DD/YYYY	
	Number Street		- William Inc.	
	City	State Zip Code	Control of the Contro	
D 110				
Part 12:	Sign Below			
true	e and correct. I unders kruptcy case can resu /s/ Dia	tand that making a false It in fines up to \$250,000 ana Sanders of Debtor 1	statement, concealing prop	nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with a pyears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date
Did	you attach additional	pages to Your Statemen	nt of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
7	No			
	Yes			
Did	you pay or agree to pa	ay someone who is not a	an attorney to help you fill ou	bankruptcy forms?
***************************************	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice,
	ies. Name of person			rador the bankruptcy i ethori i reparers riville,

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Debtor Diana		Sanders	Case number	er (if
1 First Name	Middle Name	Last Name	known)	
int Varia Umarrained Danasa	al Duamantu I accas		Part 2:	
ist Your Unexpired Person		Schodulo C: Evecutory	Contracts and Unov	pired Leases (Official Form 106G), fill in the
information below. Do not list re an unexpired personal property	al estate leases. Unexpired	leases are leases that are	still in effect; the lea	ase period has not yet ended. You may assume
Describe your unexpired per	rsonal property leases			Will the lease be assumed?
Lessor's name:				No Yes
Description of leased property:				
Lessor's name:				☐ No ☐ Yes
Description of leased property:				
Lessor's name:				No Yes
Description of leased property:				
Lessor's name:				☐ No ☐ Yes
Description of leased property:				
Lessor's name:				☐ No ☐ Yes
Description of leased property:				
Lessor's name:				☐ No ☐ Yes
Description of leased property:				
Lessor's name:				☐ No ☐ Yes
Description of leased property:				
Part 3: Sign Below				
Under penalty of perjury, I de property that is subject to an	clare that I have indicated m unexpired lease.	y intention about any pro	perty of my estate t	hat secures a debt and any personal
/s/ Diana Sanders Signature of Debtor 1	Mara Ja	₩ Signa	ature of Debtor 1	
Date 9/29/2016 MIM/DD/YYYY		Date	MM/DD/YYYY	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

in re: _	Sanders, Diana Debtor(s)	Case No				
		Chapter	Chapter7			
	VERIFICATION OF CREDITOR MATRIX					
	The above named Debtors hereby verify that	the attached list of creditors is true	e and correct to the best of their knowledge.			
Date:	9/29/2016	/s/ Sanders, Dia Sanders, Diana Signature of Del	7			

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Debtor 1	Diana First Name	Middle Name	Sanders Last Name	Case num	Case number (if known)	
				Column A Debtor 1	Column B Debtor 2 or non-filing spo	ouse
Do no	ployment compensation t enter the amount if you con ocial Security Act. Instead, li	tend that the amount received st it here:	\$ <u>0.00</u>		-	
For yo	u	<u>\$</u>	0.00			
N1 1001 -	our spouse		0.00			
	on or retirement income. t under the Social Security A	Do not include any amount re act.	ceived that was a	\$0.00		-
amour payme interna	nt. Do not include any benefi ents received as a victim of a	not listed above. Specify the traceived under the Social Solver crime, a crime against heart freecessary, list other sour	Security Act or umanity, or			
T-1-1		- :6		+\$0.00	+	
Iotala	amounts from separate page	s, if any.		- 40.00		
		onthly income. Add lines 2 column A to the total for Colur		\$ <u>802.61</u>	+	\$802.61
	D . (L - M T - 4 A 15 -	4			monthly income
		he Means Test Applie				
	nate your current monthly Copy your total current month	income for the year. Follow	v triese steps:		Copy line 11 here →	\$802.61
					Copy line 11 here →	
	Multiply by 12 (the number o					X 12
12b. I	he result is your annual inco	ome for this part of the form.				12b. <u>\$9,631.32</u>
10.0-1	lata tha was dian family in a	that couling to 5	alland the same stance.			
13 Caicu	iate the median family ind	ome that applies to you. F				
Fill in	the state in which you live.		Illinois			
Fill in	the number of people in you	r household.	5			
Fill in house	the median family income fo	r your state and size of				13. \$95,321.00
instru	ctions for this form. This list r	income amounts, go online u nay also be available at the b	sing the link specif ankruptcy clerk's o	ied in the separate ffice.		learner and the second
14. How	do the lines compare?					
14a.	Line 12b is less than or e Go to Part 3.	equal to line 13. On the top of	page 1, check box	1, There is no presumption	on of abuse.	
14b.	Line 12b is more than line Go to Part 3 and fill out F	e 13. On the top of page 1, ch Form 122A-2.	eck box 2, The pre	sumption of abuse is dete	ermined by Form 122A-2.	
Part 3:	Sign Below					
By si	gning here, I declare under p	penalty of perjury that the info	rmation on this sta	tement and in any attachr	ments is true and correct.	
×	/s/ Diana Sanders N	11ana	dy	×		
	signature of Debtor 1	July July	7 0	Signature of Debtor 2	2	
Г	Pate 9/29/2016			Date 9/29/2016		
L	MM/DD/YYYY			MM/DD/YYYY	7	
	10 3			opening the trade of the second		
		DT fill out or file Form 122A-2. Form 122A-2 and file it with t				